UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 0 22 03 2 Serial/Patent # 09 544,776					
3 Please refund the following fee(s):		4 PAI NUM	PER MBER	5 DATE FILED	6 AMOUNT
	Filing				\$
	Amendment	·			\$
	Extension of Time				\$1970,
	Notice of Appeal/Appeal				\$
	Petition				\$
	Issue				\$
	Cert of Correction/Terminal Disc.	٠.			\$
	Maintenance				\$
	Assignment				\$
	Other Other				\$
		7 TOTAL AMOUNT S 1970.		\$ 1970.	
		8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check			
	Overpayment		C	redit Dep	osit A/C #:
	Duplicate Payment		9) 4 0	258
No Fee Due (Explanation):					
Exclansion of Sime Giled after expiration of					
extendable period for reply.					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: TITLE:					
SIGNATURE Jahren Box PHONE: 308-6911					
OFFICE: Office Of letitions					
THIS SPACE DESERVED FOR PINANCE USE ONLY: APPROVED: DATE: 10/03/03					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

FORM PTO 1577 (01/90)